

PART B - FEE(S) TRANSMITTAL

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7590

05/21/2004

JOHN C. FREEMAN
BRINKS HOFER GILSON & LIONE
P.O. BOX 10395
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Express Mail mailing
Isabel EV 330129361 US
Date of Deposit August 23, 2004

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

| | |
|------------------------|--------------------|
| John C. Freeman | (Depositor's name) |
| <i>John C. Freeman</i> | (Signature) |
| August 23, 2004 | (Date) |

03/25/2004 JEL IIR 00000083 10005489

01 FC:1501 1330.00 DP
02 FC:1504 300.00 DP
03 FC:8001 30.00 DP

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/005,489 | 11/08/2001 | Erich Strasser | 56/360 | 7184 |

TITLE OF INVENTION: POSITION MEASURING DEVICE AND METHOD FOR THE START-UP OF A POSITION MEASURING DEVICE

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 08/23/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|-------------|----------|----------------|
| SUN, XIUQIN | 2863 | 702-150000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Brinks Hofer Gilson & Lione
2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

*Dr. Johannes Heidenheim GmbH**Traunreut, Germany*Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature)

(Date)

*John C. Freeman**August 23, 2004*

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